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W www.dlapiper.com**January 19, 2006****FAX TRANSMISSION COVER SHEET**To:Telephone:Fax Number:**U.S. Patent and Trademark Office
Attn.: Examiner Thein****1- 571-273-8300****From: Timothy W. Lohse *twl*
650-833-2055****Attorney Docket Number: 354706-991100****Re: U.S. Patent Application for Method and Apparatus for a Selling Service
Serial No.: 10/764,002
Examiner: Maria Theresa Thein
Art Unit: 3625****Pages: - 14 - (including this form) Originals: ☐ will be mailed ☒ will not be mailed****If there is a problem with this transmission, please call (650) 833-1548
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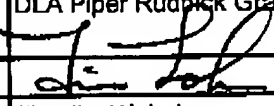
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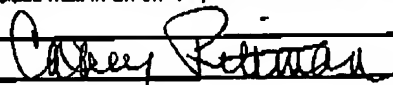
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/764,002
	Filing Date	January 23, 2004
	First Named Inventor	Randall C. Adams et al.
	Art Unit	3625
	Examiner Name	Maria Theresa Thein
	Attorney Docket Number	354706-991100
Total Number of Pages In This Submission		

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax cover to USPTO (1pg); Request for Continued Examination (1 pg); Fee Transmittal (1p); Certificate of Facsimile (1p).
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	DLA Piper Rudnick Gray Cary US LLP		
Signature			
Printed name	Timothy W. Lohse		
Date	January 19, 2006	Reg. No.	35,255

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Signature			Date
Typed or printed name	Cathy Pittman	Date	January 19, 2006

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FEE TRANSMITTAL for FY 2005	Complete If Known		
	Application Number	10/764,002	
	Filing Date	January 23, 2004	
	First Named Inventor	Randall C. Adams et al.	
	Examiner Name	Maria Theresa Thein	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3625	
TOTAL AMOUNT OF PAYMENT	(\$)395.00	Attorney Docket No.	354706-991100

METHOD OF PAYMENT (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES


Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 = _____ / 50 = _____		(round up to a whole number) x _____		

4. OTHER FEE(S)Non-English Specification, \$130 fee (no small entity discount)
Other (e.g., late filing surcharge): Request for Continued Examination**395.00****SUBMITTED BY**

Signature		Registration No. 35,255 (Attorney/Agent)	Telephone 650.833.2055
Name (Print/Type)	Timothy W. Lohse		Date January 19, 2006

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In Re: Application No. 10/764,002 Filed: January 23, 2004
Title: METHOD AND APPARATUS FOR A SELLING SERVICE
Art Unit: 3625 Examiner: Thien
Applicant: Randall C. Adams
Docket No.: 354706-991100

Certificate of Transmission under 37 CFR 1.8

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Cathy Pittman

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